

INCIDENT NUMBER		<b>SNOHOMISH COUNTY SHERIFF'S OFFICE</b> <b>Online Community Based Report</b>				CASE NUMBER	
<input type="checkbox"/> Do Not Disclose <input type="checkbox"/> OK To Disclose						IBR CODE	
INCIDENT REPORTED AS				RCW:		TODAY'S DATE AND TIME	
ADDRESS/LOCATION OF INCIDENT				CITY		PREMISE TYPE:	
INCIDENT OCCURRED BETWEEN: DATE      TIME      A.M.      P.M.      DAY				AND: DATE      TIME      A.M.      P.M.      DAY			
VICTIM NAME (LAST, FIRST, MIDDLE)					RACE	SEX	DATE OF BIRTH
VICTIM MAILING ADDRESS					CITY	STATE	ZIP CODE
VICTIM PHONE					BUSINESS PHONE		
<b>FILL OUT THE LIST OF YOUR STOLEN, DAMAGED OR LOST PROPERTY. THEN DESCRIBE BRIEFLY WHAT HAPPENED AND HOW IT HAPPENED. SEE THE BACK OF THIS FORM FOR ADDITIONAL INSTRUCTIONS.</b>							
ITEM #	<input type="checkbox"/> STOLEN <input type="checkbox"/> DAMAGED <input type="checkbox"/> LOST	BRAND NAME AND ARTICLE TYPE	MODEL #	COLOR	SERIAL #		
QTY	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)					ESTIMATED VALUE \$	
ITEM #	<input type="checkbox"/> STOLEN <input type="checkbox"/> DAMAGED <input type="checkbox"/> LOST	BRAND NAME AND ARTICLE TYPE	MODEL #	COLOR	SERIAL #		
QTY	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)					ESTIMATED VALUE \$	
ITEM #	<input type="checkbox"/> STOLEN <input type="checkbox"/> DAMAGED <input type="checkbox"/> LOST	BRAND NAME AND ARTICLE TYPE	MODEL #	COLOR	SERIAL #		
QTY	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)					ESTIMATED VALUE \$	
ITEM #	<input type="checkbox"/> STOLEN <input type="checkbox"/> DAMAGED <input type="checkbox"/> LOST	BRAND NAME AND ARTICLE TYPE	MODEL #	COLOR	SERIAL #		
QTY	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)					ESTIMATED VALUE \$	
NARRATIVE:							
I affirm that this information is true and correct:				Reviewed by:	Date:	Total Estimated Value	
SIGNED:				Entered by:	Date:	\$	
Mail the completed form to the closest Precinct: <input type="checkbox"/> South Precinct 15928 Mill Creek Blvd, Mill Creek, WA 98012 (425) 388-5250 <input type="checkbox"/> North Precinct 15100 40 <sup>th</sup> Ave NE, Marysville, WA 98271 (425) 388-5200 <input type="checkbox"/> East Precinct/Sultan P.O. Box 1650, 515 Main Street, Sultan, WA 98294 (425) 388-6260							

In order for your report to be properly handled, it will be necessary for all the information to be clearly printed, to be complete and to be accurate. The following instructions should help you with the report form. Return this form within 24 hours to the Precinct that is closest to the incident location. See the bottom of page one for precinct locations.

First, you should complete the top portion of the form with the date, time and day of the incident your name your mailing address and phone number(s). This information will be used to contact you if necessary.

It is very important to describe all lost or damaged property as completely as possible. Use more than one line if necessary, and be sure to indicate your total estimated dollar loss in the box provided in the lower right hand corner of the form.

The following are examples:

ITEM #	<input checked="" type="checkbox"/> STOLEN <input type="checkbox"/> DAMAGED <input type="checkbox"/> LOST	BRAND NAME AND ARTICLE TYPE	MODEL #	COLOR	SERIAL #
1		ANYBRAND AM/FM	TUNES 463-4S	BLACK	ATS 67895
QTY	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)				ESTIMATED VALUE
1	CASSETTE DECK				\$ 300.00
ITEM #	<input type="checkbox"/> STOLEN <input checked="" type="checkbox"/> DAMAGED <input type="checkbox"/> LOST	BRAND NAME AND ARTICLE TYPE	MODEL #	COLOR	SERIAL #
2		1987 CHEVROLET	CAMARO	RED	
QTY	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)				ESTIMATED VALUE
1	DAMAGE TO THE WINDOW AND DAMAGE TO THE DASHBOARD				\$ 1,000.00

The narrative of the report should explain what happened. Be brief, but include all the information that you feel would be helpful.

Here are some examples if brief, informative narratives:

**NARRATIVE:**

*I parked my red 1987 Chevy Camaro on the front of my house at about 9:15 pm on Tuesday night. I locked all the doors. At 8:00 a.m. on Wednesday morning, I found the passenger side door window broken out. All the items described above were missing and the glove box had been ransacked.*

**NARRATIVE:**

*I came home Sunday at 12:15 p.m. after being gone for about three hours. While I was gone, someone spray painted my garage door with red paint. I couldn't make out specific words – only strange shapes and numbers.*

If you need more space for your narrative, use a separate piece of paper. At the top of any additional page, include your name, the location where the incident occurred, and the current date.

When you have completed the report form, sign it. Make a copy of it for yourself, if one is needed for your records, then mail the original to the closest precinct. The precinct locations are listed at the bottom of the first page of this form.

**Make sure you've filled in your name, address, and phone number.** Someone from our office will contact you and provide you with an incident number for your records.